

## **ENROLLMENT VERIFICATION**

Only complete this form if you have downloaded an Enrollment Verification Certificate from the National Student Clearinghouse, and have written a statement as to why the certificate is not sufficient for proof of enrollment.

Name (Last)	(First)			(Middle Initial)
Former Name(s)	UW Student	#	Date of Birth	
Daytime Phone Number ( )	Email Addres	ss		OR OFFICE USE ONLY
Current Street Address				ocessed by: ail Date:
(City)	(State)	(Zip)	Pie	ck-Up Date:
Checklist Before You Submit:  Copy of National Student Clearinghous Certificate Statement of insufficient proof Special Requests:	☐ Mail to stud	•		
Other:		ent Signature Required est to: uwbreg@uw.edu	To	day's Date

Updated: 11/2023